UNITED STATES PATENT & TRADEMARK OFFICE Washington, D.C. 20231

| REQUEST FOR PATENT FEE REFUND | | | | |
|---|-----------------------------------|--------------------------|-----------------|-------------|
| 1 Date of Request: 72605 2 Serial/Patent # 10/068,700 | | | | |
| 3 Please refund the following fee(s): | | 4 PAPER NUMBER | 5 DATE FILED | 6 AMOUNT |
| | Filing | | | \$ |
| | Amendment | | | \$ |
| | Extension of Time | | | \$ |
| | Notice of Appeal/Appeal | | 1 1 | \$ |
| X | Petition | | 7/8/05 | \$ 750.00 |
| | Issue | | , | \$ |
| | Cert of Correction/Terminal Disc. | | | \$ |
| | Maintenance | | , | \$ |
| | Assignment | | | \$ |
| | Other | | | \$ |
| | | 7 TOTAL AMOUNT \$ 750.00 | | |
| | | 8 TO BE REFUNDED BY: | | |
| 10 REASON: | | Treasury Check | | |
| | Overpayment | C | redit Dep | osit A/C #: |
| X | Duplicate Payment | 9 | 19 4 | -415 |
| | No Fee Due (Explanation): | | | |
| Pet see pard 1/3/05/4/ cc Suplicate pet & see filed 1/8/05 | | | | |
| 11 REFUND REQUESTED BY: | | | | |
| TYPED/PRINTED NAME: - CATORIA FOUSON-BULL TITLE: Attorney | | | | |
| SIGNATURE: AMUNICASM-BALL PHONE: 2 3212 | | | | |
| office: Petitions | | | | |
| THIS SPACE RESERVED FOR FINANCE USE ONLY: | | | | |
| APPROVED: | | | | |

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B